

SAPC - 22258
Copy of 5

10 December 1957

MEMORANDUM FOR: Finance Division, Accounts Branch

THROUGH : Monetary Branch

SUBJECT : Disbursement by Check

1. It is requested that an check be drawn in the amount of \$8,974.02, in favor of the Perkin-Elmer Corporation. The payment represents reimbursement to the claimant for the manufacture of certain items for Project AQUATONE. The check should be sent to Room 520, 1717 H Street, N. W., for delivery to the payee.

2. For your protection in taking this action, I certify that there is in the custody of the Project Comptroller, invoices and related documents which are consistent with the contractual agreement which have been approved by an appropriate approving authority and certified by an authorized certifying officer in the total amount of \$8,974.02. The expense is properly chargeable as follows:

Debit: 600.1-X-175-10-000 (09) \$8,974.02

Credit: Cash \$8,974.02
Obligation Reference Number 5023

Authorized Certifying Officer
10 December 1957

Distribution:

- O & 1 - Addressee
- 3 - Contract SC-21-54 (Finance)
- 4 - Octroi Master
- 5 - Chrono

aer:10 December 1957

SECRET

SECRET

Copy 3 of 6
SAPC NO. 22583

December 18, 1957

Ther Perkins-Klmer Corporation
Main Avenue
Norwalk, Connecticut

Reference: Contract SC 21-54

Gentlemen:

Enclosed is a cashier's check number M34186, drawn on The National Bank of Washington in the amount of \$3,974.02, which represents payment of your invoices listed hereunder in the amounts indicated:

INVOICE NUMBER

10372
10373

AMOUNT

| | |
|--------------|-------------------|
| | \$3,967.78 |
| | <u>5.006.24</u> |
| TOTAL | \$3,974.02 |

Yours very truly,

Doug

Attachment: Check No. M34186

Distribution:

- 0 & 1 - Addressee w/att
- 23 - Contract SC 21-54
- 4 - Octroi Master
- 5 - Reading Finance
- 6 - Chrono

DNO/eh/HEB/18 December 1957

SECRET

SECRET

SAFC - 22258
Copy 2 of 5

10 December 1957

MEMORANDUM FOR: Finance Division, Accounts Branch

THROUGH : Monetary Branch

SUBJECT : Disbursement by [] Check

1. It is requested that an [] check be drawn in the amount of \$8,974.02, in favor of the Perkin-Elmer Corporation. The payment represents reimbursement to the claimant for the manufacture of certain items for Project AQUATONE. The check should be sent to Room 580, 1717 H Street, N. W., for delivery to the payee.

2. For your protection in taking this action, I certify that there is in the custody of the Project Controller, invoices and related documents which are consistent with the contractual agreement which have been approved by an appropriate approving authority and certified by an authorized certifying officer in the total amount of \$8,974.02. The expense is properly chargeable as follows:

Debit: 600.1-X-175-10-000 (09) \$8,974.02

Credit: Cash

\$8,974.02

Obligation Reference Number 5083

M 34186

[]
Authorized Certifying Officer
10 December 1957

SECRET

Standard Form No. 1034—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. Vou. No.

Bu. Vou. No.

Page 1 of 1

U. S.
(Department, bureau, or establishment)

Voucher prepared at
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No.

To The Perkin-Elmer Corporation
(Payee)

Main Avenue Norwalk, Connecticut
(Address) (City) (State)

| |
|---------|
| PAID BY |
|---------|

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms | QUANTITY | UNIT PRICE | | AMOUNT | |
|-----------------------|-----------------------------|---|----------|------------|-----|----------------|------|
| | | | | Cost | Per | Dollars | Cts. |
| | | INVOICE NUMBERS | | | | | |
| | | 10373 | | | | \$ 5,006 | 24* |
| | | 10372 | | | | 3,967 | 78✓ |
| | | Use continuation sheet(s) if necessary | | | | | |
| | | | | | | Total \$ 8,974 | 02✓ |

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from to Weight Government B/L No. Total \$ 8,974 02✓

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

(Payee must NOT use this space)

Differences

Date *Payee
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for

(Signature or initials)

Per Title
tract No. SC-21-54 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for

† Approved for \$

**SIGN
ORIGINAL
ONLY**

Date

(Approving Officer)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. dated, 19...., for \$ } on Treasurer of the United States in
Cash, \$, on, 19.... Payee favor of payee named above.
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$", and over his official title.

Title

Standard Form No. 1034—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. _____

Bu. Vou. No. _____

Page 1 of 1

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To **The Perkin-Elmer Corporation**
(Payee)
Main Avenue **Norwalk, Connecticut**
(Address) (City) (State)

| |
|---------|
| PAID BY |
|---------|

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms INVOICE NUMBERS | QUANTITY | UNIT PRICE | | AMOUNT | |
|-----------------------|-----------------------------|--|----------|------------|-----|-----------------|-----------|
| | | | | Cost | Per | Dollars | Cts. |
| | | 10373 | | | | \$ 5,006 | 84 |
| | | 10372 | | | | 3,967 | 78 |
| | | | | | | \$ 8,974 | 02 |

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total **\$ 8,974 02**

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences _____

Date _____ *Payee _____
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for _____

(Signature or initials) _____

Per _____ Title _____
Contract No. **88-01-54** Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____
(Authorized Certifying Officer)

By _____

**SIGN
ORIGINAL
ONLY**

Title **(Contracting Officer)**

Title **(Approving Officer)**

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in
{ Cash, \$ _____, on _____, 19____. Payee _____ } favor of payee named above.
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____

11-2 C
COPY 1 OF 2
12186

THE PERKIN-ELMER CORPORATION

SALES ORDER NO.

MAIN AVENUE, NORWALK, CONNECTICUT

TELEPHONE: VICTOR 7-2422

24446

| ORIGIN AREA-S | DEST. AREA-S | DESTINATION | CUSTOMER'S ORDER NO., REQ. NO., AND DATE | | QUOTE NO. | NO. INV. |
|---------------|--------------|-------------|--|--|-----------|----------|
| STAT | 033 | 12 | MEMO | | 2-23-55 | 4 |

SHIP TO BILL TO

BELOW

L-40

THE INTERNATIONAL SURVEY CORP.
% MR. JOHN R. SCHOEMER, JR.
220 EAST 42ND STREET
NEW YORK, NEW YORK

INVOICE NO.

10373

INVOICE DATE

11-18-57

DATE SHIPPED

TERMS: 30 DAYS NET - NO CASH DISCOUNT

| SHIP VIA: | | PPD - COL | | F.O.B. SELLERS FACTORY UNLESS OTHERWISE SPECIFIED | | PARTIAL | COMPLETE |
|-------------|-------|-----------|------|--|---------------|------------|----------------|
| ITEM NO. | QUAN. | PART NO. | CODE | DESCRIPTION | QTY. SHIP. | UNIT PRICE | INVOICE AMOUNT |
| | | | | TOTAL COSTS TO 10-31-57 | | | \$ 126,138.26 |
| | | | | LESS: ITEM BILLINGS TO DATE | | | |
| | | | | AT COST | | | |
| | | | | UNRECOUPED PROGRESS PAYMENTS | \$82,298.21 | | |
| | | | | | 38,833.81 | | 121,132.02 |
| | | | | PROGRESS PAYMENT REQUEST----- | | | \$ 5,006.24 |
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APPROVED BY

DEC 5 1957

EXAMINE MATERIAL ON RECEIPT. IF DAMAGED, ENTER CLAIM AGAINST CARRIER AS OUR RESPONSIBILITY CEASES WHEN MATERIAL IS DELIVERED TO CARRIER. CLAIMS FOR SHORTAGE MUST BE MADE WITHIN FIVE DAYS FROM RECEIPT OF GOODS. GOODS WILL NOT BE ACCEPTED FOR CREDIT AFTER 30 DAYS FROM DATE OF INVOICE.

INVOICE

SAPC 22186
COPY 1 OF 2

SCHEDULE SUPPORTING PROGRESS PAYMENT INVOICE
TOTAL COST BASIS

CONTRACTOR'S NAME The Perkin-Elmer Corporation

ADDRESS Main Avenue, Norwalk, Connecticut

CONTRACT NO. _____ DATE 11/18/57

AMOUNT OF CONTRACT \$142,289.00 P.P. INVOICE NO. 10373

Statement of Total Costs incurred from 3-1-55 To 10-31-57
(Costs must be cumulative to date)

| | | | |
|---|----|------------|--------------|
| 1. Direct material (Exclusive of progress payments to subcontractors) | \$ | 53,577.49 | |
| 2. Progress payments to subcontractors (If provided in the contract) | | -0- | |
| 3. Direct Labor (Of prime contractor only) | | 27,297.43 | |
| 4. Indirect manufacturing & production expense (Specify rate _____ %) | | 30,697.86 | |
| 5. Other direct cost (If any specify) | | 54.00 | |
| 6. _____ | | | |
| 7. Subtotal | | 111,626.78 | |
| *8. General & Administrative expenses (Specify rate <u>13.0</u> %) | | 14,511.48 | |
| 9. Total costs (7 plus 8) | \$ | 126,138.26 | |
| 10. Cost, or negotiated cost or contract price of items delivered | | 82,298.21 | |
| 11. Total costs subject to progress payment (9 less 10) | | 43,840.05 | |
| **12. Deduct progress payment (s) to subcontractor (s) | | -0- | |
| 13. Balance (11 less 12) | | 43,840.05 | |
| ***14. _____ % of line 13 | | -0- | |
| 15. Contractor's own costs eligible for progress payments (13 less 14) | \$ | 43,840.05 | |
| 16. Gross amount eligible for progress payment (12 plus 15) | | | \$ 43,840.05 |
| 17. Total amount of progress payments to date | \$ | 71,073.55 | |
| 18. Recoupments to date as made by AF finance officer | | 32,239.74 | |
| 19. Unrecouped progress payments (17 less 18) | | | 38,833.81 |
| 20. Balance (16 less 19) | | | 5,006.24 |
| 21. Amount in line 16 above | \$ | 43,840.05 | |
| 22. Total contract price | \$ | 142,289.00 | |
| 23. Contract price of items delivered to date | | 92,174.00 | |
| 24. Contract price of items to be delivered (22 less 23) | \$ | 50,115.00 | |
| 25. 85 % (or other limitation percentage if provided by the contract) of line 24 | | 44,101.20 | |
| 26. Positive balance, if any 21 less 25) 38 % (if negative, insert 0) | | | -0- |
| 27. Net amount available for progress payment (20 less 26) | \$ | | 5,006.24 |

THE PERKIN-ELMER CORPORATION

MAIN AVENUE, NORWALK, CONNECTICUT
TELEPHONE: VICTOR 7-2422

SALES ORDER NO.

24033

| ORIGIN AREA-S | DEST. AREA-S | DESTIN- ATION | CUSTOMER'S ORDER NO., REQ. NO., AND DATE | QUOTE NO. | NO. INV. |
|------------------|-----------------|------------------|--|-----------|-------------|
| STAT | | 033 | MEMO 1-10-55 | 2332 | 4 |

BELOW

INVOICE NO.

10372

INVOICE DATE

11-18-57

DATE SHIPPED

TERMS: 30 DAYS NET - NO CASH DISCOUNT

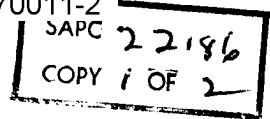
| SHIP VIA: | | PPD - COL | F.O.B. SELLERS FACTORY UNLESS OTHERWISE SPECIFIED | | | PARTIAL | COMPLETE |
|-------------|-------|-----------|--|-------------------------------|---------------|------------|--|
| ITEM NO. | QUAN. | PART NO. | CODE | DESCRIPTION | QTY. SHIP. | UNIT PRICE | INVOICE AMOUNT |
| STAT | | | | TOTAL COSTS TO 10-31-57 | | | \$ 154,778.88 |
| | | | | LESS: ITEM BILLINGS TO DATE | | | |
| | | | | AT COST | | | |
| | | | | UNRECOUPED PROGRESS PAYMENTS | \$135,973.21 | | 150,811.10 |
| | | | | PROGRESS PAYMENT REQUEST----- | 14,837.89 | | \$ 3,967.78 |
| | | | | | | | <div>APPROVED BY</div> <div>DEC 5 1957</div> |

EXAMINE MATERIAL ON RECEIPT. IF DAMAGED, ENTER CLAIM AGAINST CARRIER AS OUR RESPONSIBILITY CEASES WHEN MATERIAL IS DELIVERED TO CARRIER. CLAIMS FOR SHORTAGE MUST BE MADE WITHIN FIVE DAYS FROM RECEIPT OF GOODS. GOODS WILL NOT BE ACCEPTED FOR CREDIT AFTER 30 DAYS FROM DATE OF INVOICE.

INVOICE

Encl 2
22186
1 2SCHEDULE SUPPORTING PROGRESS PAYMENT INVOICE
TOTAL COST BASISCONTRACTOR'S NAME The Perkin-Elmer CorporationADDRESS Main Avenue, Norwalk, ConnecticutCONTRACT NO. _____ DATE 11-16-57AMOUNT OF CONTRACT \$181,456.00 P.P. INVOICE NO. 10372Statement of Total Costs incurred from 1-31-56 To 10-31-57
(Costs must be cumulative to date)

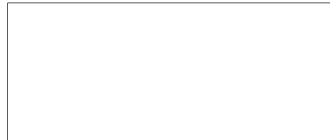
| | | | |
|---|----|-------------------|---------------------|
| 1. Direct material (Exclusive of progress payments to subcontractors) | \$ | <u>72,014.19</u> | |
| 2. Progress payments to subcontractors (If provided in the contract) | | <u>-0-</u> | |
| 3. Direct Labor (Of prime contractor only) | | <u>25,909.42</u> | |
| 4. Indirect manufacturing & production expense (Specify rate _____ %) | | <u>39,006.50</u> | |
| 5. Other direct cost (If any specify) | | <u>42.35</u> | |
| 6. _____ | | | |
| 7. Subtotal | | <u>136,972.46</u> | |
| *8. General & Administrative expenses (Specify rate <u>13.0</u> %) | | <u>17,806.42</u> | |
| 9. Total costs (7 plus 8) | \$ | <u>154,778.88</u> | |
| 10. Cost, or negotiated cost or contract price of items delivered | | <u>135,973.21</u> | |
| 11. Total costs subject to progress payment (9 less 10) | | <u>18,805.67</u> | |
| **12. Deduct progress payment (s) to subcontractor (s) | | <u>-0-</u> | |
| 13. Balance (11 less 12) | | <u>18,805.67</u> | |
| ***14. _____ % of line 13 | | <u>-0-</u> | |
| 15. Contractor's own costs eligible for progress payments (13 less 14) | \$ | <u>18,805.67</u> | |
| 16. Gross amount eligible for progress payment (12 plus 15) | | | \$ <u>18,805.67</u> |
| 17. Total amount of progress payments to date | \$ | <u>130,145.64</u> | |
| 18. Recoupments to date as made by AF finance officer | | <u>115,307.75</u> | |
| 19. Unrecouped progress payments (17 less 18) | | | <u>14,837.89</u> |
| 20. Balance (16 less 19) | | | <u>3,967.78</u> |
| 21. Amount in line 16 above | \$ | <u>18,805.67</u> | |
| 22. Total contract price | \$ | <u>181,456.00</u> | |
| 23. Contract price of items delivered to date | | <u>152,290.00</u> | |
| 24. Contract price of items to be delivered (22 less 23) | \$ | <u>29,166.00</u> | |
| 25. 80 % (or other limitation percentage if provided by the contract) of line 24 | | <u>25,666.08</u> | |
| 26. Positive balance, if any 21 less 25) 88% (if negative, insert 0) | | | <u>-0-</u> |
| 27. Net amount available for progress payment (20 less 26) | \$ | | <u>3,967.78</u> |



December 5, 1957

Dan:

The attached invoices cover progress payments for Perkin-Elmer costs incurred on Contract SC21-54 through October 31, 1957. The schedules attached to the invoices give a breakdown of the costs against which payment is requested.



EBW:PAM

STAT